



EXPRESS MAIL CERTIFICATE

DOCKET NO. : **1819/100121**

APPLICANTS : **Jeffrey K. Lange, Robert H. Paine, Jeremiah L. Parry-Hill, and Steven H. Wunrow**

TITLE : **METHOD AND SYSTEM FOR PROVIDING AUTOMATED CAPTIONING FOR AV SIGNALS**

Certificate is attached to the **Request for Continued Examination (RCE) Transmittal Letter (1 page)** in duplicate of the above-named application.

"EXPRESS MAIL" NUMBER: **EV522794368US**

DATE OF DEPOSIT: **January 24, 2005**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Shawn A. Lockett

(Typed or printed name of person mailing paper or fee)

A handwritten signature in black ink, appearing to read "Shawn A. Lockett".

(Signature of person mailing paper or fee)

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEES TRANSMITTAL
JAN 24 2005 FOR FY 2005**

~~Small Entity Status~~ Applicant claims small entity status. See 37 CFR 1.27

~~TOTAL AMOUNT OF PAYMENT~~ (\$930)

Application Number	09/800,212
Filing Date	March 6, 2001
First Named Inventor	Jeffrey K. Lange et al.
Examiner Name	Lewis A. Michael
Art Unit	2655
Attorney Docket No.	1819/100121

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 14-1138 Deposit Account Name: Nixon Peabody LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-20238.

FEE CALCULATION

1. BASIC FILING, SEARCH AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity Fee (\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple document claims

360 180

Total Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

Multiple Dependent Claims

Fee (\$) **Fee Paid (\$)**

21 - 20 or HP = 1 x \$25 = \$25

HP = highest number of total claims paid for, if greater than 20

Indep. Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

3 - 3 or HP = 0 x \$100 = \$0

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

_____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: RCE Filing Fee \$395 and Request for Three-Month Extension of Time \$510

Fee Paid (\$)

\$905

SUBMITTED BY

Signature		Registration No. 35,584 (Attorney/Agent)	Telephone (585) 263-1014
Name (Print/Type)	Gunnar G. Leinberg	Date	January 24, 2005

CERTIFICATE OF MAILING OR TRANSMISSION [35 CFR 1.8(a)]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.

Signature: _____

Name: _____

SEND TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450



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TITLE : **METHOD AND SYSTEM FOR PROVIDING AUTOMATED CAPTIONING FOR AV SIGNALS**

Certificate is attached to the **Request for Three-Month Extension of Time** (1 page) in duplicate of the above-named application.

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TITLE : **METHOD AND SYSTEM FOR PROVIDING AUTOMATED CAPTIONING FOR AV SIGNALS**

Certificate is attached to the **Amendment (10 pages)** of the above-named application.

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